



Procurement Card User Agreement

Your signature verifies that you understand and agree to comply with the guidelines listed below.

1. The purchasing card is provided to County of Navajo employees based on their need to purchase goods and services for County of Navajo business only. A card may be revoked at any time based on change or assignment or location. The card is not an entitlement nor reflective of title or position.
2. This card is for County of Navajo business related purchases only; personal charges shall not be made on the card. You are responsible for all charges while the card is in your possession.
3. Misuse of the card can be considered misappropriation of County funds, which will likely result in corrective action, up to and including termination of employment.
4. All charges are billed directly to and paid directly by the County of Navajo. Any personal charges are strictly prohibited and may be considered misappropriation of County funds. The card user will be held responsible for reimbursing the County the total amount of any unauthorized purchase or other discrepancies resulting for an audit. Furthermore, the County has the right to collect any amount owed either during employment or after, including by way of payroll deductions.
5. Card users are expected to comply with County policy in order to protect County assets. This includes following proper card security measures.
6. Cardholders are responsible for reconciling their transactions throughout the month and resolving any discrepancies by contacting the merchant unless a designated Reconciler has been assigned by the Department Liaison. All transactions must be reconciled prior to 3:00 p.m. on the 4th business day of the month.
7. A lost or stolen card must be reported immediately by telephone to Wells Fargo Customer Service at 1-800-932-0036 and to your department's pCard liaison within one business day.
8. Card users must return the department card, along with receipts and packing slips associated with pCard transactions to the designated department cardholder in a timely manner.

Signature of Applicant

Card user Printed Name

Date

Department and Division